

DEC 14 2006

PTO/SB/21 (07-06)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM	Application Number	10/816,011	
	Filing Date	March 31, 2004	
	First Named Inventor	Radestock et al.	
	Art Unit	2164	
	Examiner Name	Adams, Charles D.	
Total Number of Pages in This Submission	15	Attorney Docket Number	34874-093 / 2004P00135US

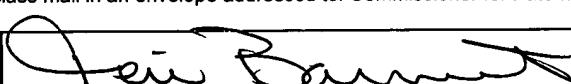
ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Remarks Return receipt postcard.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Mintz Levin Cohn Ferris Glovsky & Popeo PC		
Signature			
Printed name	Joseph Juliano		
Date	December 11, 2006	Reg. No.	54,780

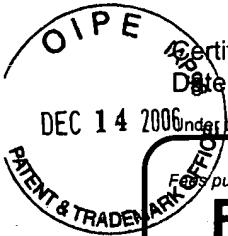
CERTIFICATE OF TRANSMISSION/MAILING

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Signature			
Typed or printed name	Teri Barnett	Date	12/11/06

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PTO/SB/17 (07-06)

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
For FY 2005** Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

400.00

Complete if Known

Application Number	10/816,011
Filing Date	March 31, 2004
First Named Inventor	Radestock et al.
Examiner Name	Adams, Charles D.
Art Unit	2164
Attorney Docket No.	34874-093 / 2004P00135US

METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): _____ Deposit Account Deposit Account Number: 50-0311 Deposit Account Name: Mintz Levin

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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under 37 CFR 1.16 and 1.17

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Small EntityFee (\$) 50 25

Each independent claim over 3 (including Reissues)

Fee (\$) 200 100

Multiple dependent claims

Fee (\$) 360 180Total ClaimsExtra ClaimsFee (\$)Fee Paid (\$)

20 - 20 or HP = 0 x 50 = 0

Multiple Dependent ClaimsFee (\$) Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. ClaimsExtra ClaimsFee (\$)Fee Paid (\$)

5 - 3 or HP = 2 x 200 = 400.00

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

- 100 = / 50 = (round up to a whole number) x = _____

Fees Paid (\$) _____**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

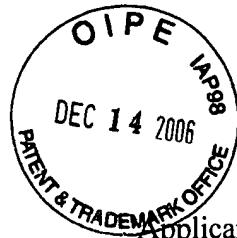
Other (e.g., late filing surcharge): _____

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 54,780	Telephone (858) 320-3000
Name (Print/Type)	Joseph Juliano		

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Radestock et al.

Art Unit : 2164

Serial No. : 10/816,011

Examiner : Adams, Charles D.

Filed : March 31, 2004

Title : FAST SEARCH WITH VERY LARGE RESULT SET

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

REPLY

This reply is responsive to the non-final office action mailed October 10, 2006. Please amend the above-identified application as follows:

Amendments to the Claims begin on page 2 of this paper.

Remarks begin on page 9 of this paper.

CERTIFICATE OF MAILING BY FIRST CLASS MAIL

I hereby certify under 37 CFR §1.8(a) that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage on the date indicated below and is addressed to the Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

December 11, 2006

Date of Deposit

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